

REMARKS

Applicants respectfully request further examination and reconsideration in view of the amended claims and the arguments set forth fully below. In the Office Action mailed March 12, 2007, claims 1-27 have been rejected. In response, the Applicants have submitted the following remarks, cancelled claim 5, and amended claims 1, 8, 12, 17 and 23. Accordingly claims 1-4 and 6-27 are still pending. Favorable reconsideration is respectfully requested in view of the amended claims and the remarks below.

Rejections Under 35 U.S.C. §103

Claims 1-27 have been rejected under 35 U.S.C. §103(a) as being unpatentable over U.S. Patent Publication No. 2002-0038227 to Fey (hereinafter Fey). The Applicants respectfully disagree with this rejection.

Fey teaches a system and method for maintaining a centralized help screen and data management system in communication with a plurality of screening facilities, such screening facilities including mobile units for dispatch. The system and method of Fey transmits data and test results to a centralized health screening and data management system for analysis and storage in a manner that is accessible for report generation and aggregate information and analysis (Fey, abstract).

While the Fey reference does indeed teach a centralized health data management system and method, Fey does not actually teach, nor make obvious, utilizing the collected health data in comparing that health data to previously stored data, and calculating a likelihood of the presence of a condition of a patient's heart based on the health data. Furthermore, Fey does not teach a graphical user interface utilized to display not only the likelihood of the presence of a condition, but also one that includes field boxes utilized to enter a specific parameter value of a patient, wherein the field boxes are defined by type of parameter values horizontally, and the leads of measured ECG parameters vertically.

In contrast to the teachings of Fey, the method and system of the present invention determines the likelihood of the presence of a condition of a patient's heart by comparing the at least one parameter value of a biomedical signal of the patient to all corresponding parameter values stored in a database. The database of the present

invention stores parameter values of ECGs (biomedical signals) of a large number of patients, and compares those parameter values to the subject patent's parameter value to calculate a probability of the presence of a condition of that patient's heart (present invention, paragraphs 21-22). The graphical user interface of the present invention includes a plurality of field boxes, wherein values of the patient are entered and are defined by the leads of the measured ECG parameters on a vertical axis and the types of parameter values on the horizontal access. Once the patient's parameter values are entered in the appropriate field boxes, a "ready" button is utilized to calculate the likelihood of the presence of a condition of the patient's heart, which are then displayed on the graphical user interface. Fey does not teach nor make obvious the calculation of the likelihood of a presence of a condition of a patient's heart, nor the graphical user interface.

The independent claim 1 is directed to a method for determining the presence of a condition of a patient's heart, the method comprising the steps of: reading at least one parameter value of a bio-medical signal of a patient, and determining the likelihood of the presence of a condition of a patient's heart based on the at least one parameter value, the step of determining including the step of comparing the at least one parameter value of the bio-medical signal with all corresponding parameter values stored in a database and calculating a percentage representing the likelihood, wherein all corresponding parameter values in the database are collected from a plurality of patients, and displaying the likelihood on a graphical user interface (GUI), wherein the at least one parameter of the patient is entered in a field box defined by a lead of measured parameter values and a parameter value. As described above, Fey does not teach or make obvious calculating a likelihood of a condition of a patient's heart nor the graphical user interface as described and claimed in the present invention.

Claims 2-4 and 6-7 are dependent upon the independent claim 1. As discussed above, the independent claim 1 is allowable over the teachings of Fey. Accordingly, claims 2-4 and 6-7 are also allowable as being dependent upon an allowable base claim. Claim 5 has been cancelled.

The remainder of the independent claims, including independent claims 8, 12, 17 and 23 have been amended to include the graphical user interface not taught by Fey. For at least these reasons, the Applicants respectfully submit that the independent claims 8, 12, 17 and 23 are all allowable as they are not anticipated by, nor made obvious by the Fey reference.

Claims 9-11 are dependent upon the independent claim 8. As discussed above, the independent claim 8 is allowable over the teachings of Fey. Accordingly, claims 9-11 are also allowable as being dependent upon an allowable base claim.

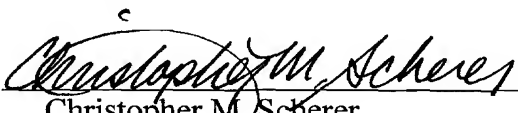
Claims 13-16 are dependent upon the independent claim 12. As discussed above, the independent claim 12 is allowable over the teachings of Fey. Accordingly, claims 13-16 are also allowable as being dependent upon an allowable base claim.

Claims 18-22 are dependent upon the independent claim 17. As discussed above, the independent claim 17 is allowable over the teachings of Fey. Accordingly, claims 18-22 are also allowable as being dependent upon an allowable base claim.

Claims 24-27 are dependent the independent claim 23. As discussed above, the independent claim 23 is allowable over the teachings of Fey. Accordingly, claims 24-27 are also allowable as being dependent upon an allowable base claim.

For these reasons, Applicants respectfully submit that all of the claims are now in a condition for allowance, and allowance at an early date would be appreciated. Should the Examiner have any questions or comments, they are encouraged to call the undersigned at 414-271-7590 to discuss the same so that any outstanding issues can be expeditiously resolved.

Respectfully submitted,
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